Wisconsin

Preventing and Reducing Obesity Through a Coordinated School Health Program

Public Health Problem

Wisconsin schools serve 1.2 million students. In 2001, more than half (57%) of Wisconsin's youth (aged 13–18 years) did not attend daily physical education classes. In 2001, 15% were at risk for obesity, 10% were obese, and 88% did not consume the recommended five or more servings of fruits and vegetables on the day before the survey.

Evidence That Prevention Works

Health education in schools can reduce the prevalence of health risk behaviors among young people. For example, health education resulted in a 37% reduction in the onset of smoking among 7th graders. In addition, obese girls in the 6th and 8th grades lost weight through a program at school, and students who attended a school-based life-skills training program were less likely than other students to smoke or use alcohol or marijuana.

Program Example

Using CDC funds, Wisconsin established coordinated school health programs (CSHPs), giving its students the advantages of a well-rounded approach to school health that includes health and physical education, health and nutrition services, counseling/psychological services, a healthy school environment, and parent and community involvement. In 2001, in collaboration with the University of Wisconsin, the state's Department of Public Instruction (DPI) established an annual Best Practices in Physical Activity and Health Education Symposium, a 2-day staff development workshop for teachers. The DPI and Department of Health and Family Services were also awarded \$700,000 in additional CDC funding for a cardiovascular disease prevention project in Milwaukee Public Schools, resulting in enhanced nutrition education, school meals, and opportunities for physical activity. All Wisconsin school districts received nutrition education information and training opportunities. More than 3,200 staff were trained in topics such as the Dietary Guidelines for Americans 2000, the importance of a good breakfast, the relationship of nutrition to learning, and school nutrition policies to support healthy eating. In 2001, along with the state school health and physical education association, the DPI implemented "Movin' Schools," a complement to CDC's Youth Media Campaign. More than 10,000 young people increased their physical activity through school-linked activities in 2002.

Implications

CSHPs are a vehicle for collaboration and are a good use of resources to improve the health of youth and the adults they will become. This program demonstrates how dollars invested in CSHPs deliver information and ideas for healthier living to thousands of students and their families.